# Rec'd PCT/PTO 26 JAN 2006

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Application Data Sheet Application Information	
Application number::	
Filing Date::	
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	
Computer Readable Form (CRF)?:: Number of Copies of CRF::	No
Title::	Improvement Relating to Radio Communication Systems
Attorney Docket Number::	0074-510575
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	16
Small Entity?::	No
Latin name::	
Variety Denomination name::	
Petition included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Authority Type:: Inventor

**Primary Citizenship** 

Country:: New Zealand Status:: Full Capacity

Given Name:: Adrian

Middle Name:: David

Family Name:: Busch

Name Suffix::

City of Residence:: Christchurch

State or Province of

Residence::

Country of Residence:: New Zealand

Street of mailing address:: 40 Hills Road

City of Mailing address:: Christchurch

State or Province of mailing address::
Country of mailing

address::

Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor

**Primary Citizenship** 

Country:: New Zealand Status:: Full Capacity

Given Name:: Paul

Middle Name:: Anthony

Family Name:: Churton

Name Suffix::

City of Residence:: Christchurch

State or Province of

Residence::

Country of Residence:: New Zealand

Street of mailing address:: 65 Colman Avenue, Sockburn

City of Mailing address:: Christchurch

State or Province of mailing address::
Country of mailing

address::

Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor

**Primary Citizenship** 

Country:: New Zealand Status:: Full Capacity

Given Name:: Shyh-Kuo

Middle Name::

Family Name:: Kuo

Name Suffix::

City of Residence:: Christchurch

**State or Province of** 

Residence::

Country of Residence:: New Zealand

Street of mailing address:: 35 Garreg Road, Fendalton

City of Mailing address:: Christchurch

State or Province of mailing address::
Country of mailing

address::

Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor

**Primary Citizenship** 

Country:: New Zealand Status:: Full Capacity

Given Name:: Stefan

Middle Name:: John

Family Name:: Lendnal

Name Suffix::

City of Residence:: Christchurch

**State or Province of** 

Residence::

Country of Residence:: New Zealand

Street of mailing address:: 99 Stanbury Street, Spreydon

City of Mailing address:: Christchurch

State or Province of mailing address::
Country of mailing

address::

Postal or Zip Code of mailing address::

**Applicant Authority Type::** 

**Primary Citizenship** 

Country:: Status::

Given Name::

Middle Name:: Family Name:: Name Suffix::

City of Residence:: State or Province of

Residence::

Country of Residence::

Street of mailing address::

City of Mailing address::

State or Province of mailing address::
Country of mailing

address::

Postal or Zip Code of mailing address::

Inventor

New Zealand Full Capacity

**Kishore** 

Mehrotra

Christchurch

**New Zealand** 

1/7 Brake Street, Upper Riccarton

Christchurch

Applicant Authority Type:: Inventor

**Primary Citizenship** 

Country:: New Zealand Status:: Full Capacity

Given Name:: Douglas

Middle Name:: Andrew

Family Name:: McConnell

Name Suffix::

City of Residence:: Christchurch

State or Province of

Residence::

Country of Residence:: New Zealand

Street of mailing address:: 111 Gardiners Road, Harewood

City of Mailing address:: Christchurch

State or Province of mailing address::
Country of mailing

address::

Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor

**Primary Citizenship** 

Country:: New Zealand Status:: Full Capacity

Given Name:: lan

Middle Name:: Vince

Family Name:: McLoughlin

Name Suffix::

City of Residence:: Christchurch

State or Province of

Residence::

Country of Residence:: New Zealand

Street of mailing address:: 27 Springbank Street, Bryndwr

City of Mailing address:: Christchurch

State or Province of mailing address::
Country of mailing

address::

Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor

**Primary Citizenship** 

Country:: New Zealand Status:: Full Capacity

Given Name:: lain

Middle Name:: Murdoch

Family Name:: Pow

Name Suffix::

City of Residence:: Christchurch

State or Province of

Residence::

Country of Residence:: New Zealand

Street of mailing address:: 22 Aintree Street, Bishopdale

City of Mailing address:: Christchurch

State or Province of mailing address::
Country of mailing

address::

Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor

**Primary Citizenship** 

Country:: New Zealand Status:: Full Capacity

Given Name:: Thomas

Middle Name:: Gregory

Family Name:: Scott

Name Suffix::

City of Residence:: Christchurch

State or Province of

Residence::

Country of Residence:: New Zealand

Street of mailing address:: 4 Kingston Place, Harewood

City of Mailing address:: Christchurch

State or Province of mailing address::
Country of mailing

address::

Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor

**Primary Citizenship** 

Country:: Australia Status:: Full Capacity

Given Name:: David

Middle Name:: lan

Family Name:: Spalding

Name Suffix::

City of Residence:: Christchurch

**State or Province of** 

Residence::

Country of Residence:: New Zealand

Street of mailing address:: 59 Woodside Common, Westmorland

City of Mailing address:: Christchurch

State or Province of mailing address::
Country of mailing

address::

Postal or Zip Code of mailing address::

Correspondence Information	
Correspondence Customer	
Number::	000110
Name::	
Street of mailing address::	
City of mailing address::	
State or Province of mailing	
address::	
Country of mailing address::	
Postal or Zip Code of mailing	
address::	
Phone number::	215-563-4100
Fax Number::	215-563-4044
E-Mail address::	vpace@ddhs.com